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PATENT APPLICATION FEE DETERMINATION RECOR							Application or Docket Number						
	CAILM A	d I LICATIO		A-23									
CLAIMS AS FILED - PART I (Column 1) (Column 2)							LL ENTITY	OR	OTHER T				
FOR	-		ER FILED	NUMBER	EXTRA	RA'	TE FEE		RATE	FEE .			
	SIC FEE CFR 1.16(a))	¥ * * * *					§ 355	OR		\$			
	AL CLAIMS CFR 1.16(c))	25	minu	s 20 = * 5		x \$_1	8 = 90	OR	x \$=				
	EPENDENT CLA	AIMS 2	min	ıs 3 = * 0		x <u>0</u>	_= 0	OR	x=				
MU	LTIPLE DEPEN	DENT CLAIM PRE	SENT (37	CFR 1.16(d))		+	_=	OR	+ =				
* If the difference in column 1 is less then zero, enter "0" in column 2							AL 445	OR	TOTAL				
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							LL ENTITY	OR	OTHER T				
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
AMENDMENT	Total (37 CFR 1.16(e))	*	Minus	**	=	x \$	_=	OR	x \$=				
ME	Independent (37 CFR 1.16(b))	*	Minus	***	=	x=	_=	OR OR	x=	•			
^	FIRST PRESENTATION OF MULTIPLE DEP			ENDENT CLAIM	(37 CFR 1.16(d))] +	_=	OR	+=				
							AL	OR	TOTAL				
		(Column 1)		(Column 2)	(Column 3)	ADDIT. F	EE	1	DDIT. FEE	<u></u>			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	OR	RATE	ADDI- TIONAL FEE			
NDN	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$	_=		x \$=				
ME	Independent (37 CFR 1.16(b))	*	Minus	***	-	x	_=	OR OR	x=				
A	FIRST PRES	SENTATION OF M	ENDENT CLAIM	(37 CFR 1.16(d))]+	_=	OR	+=					
(Column 1) (Column 2) (Column 3)						TO ADDIT.	TAL FEE	OR _A	TOTAL DDIT. FEE				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$	_=	OR OR	x \$=				
	Independent (37 CFR 1.16(b))	*	Minus	***	=	x	_=	OR OR	x=				
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						_=	OR	+=				
* 1	the enter in action	mn 1 is less than the	entry in colum	nn 2, write "0" in colu	mn 3		TAL	OR	TOTAL				
				in 2, write "0" in colu S SPACE is less than		ADDIT.	ree	- A	DDIT. FEE				

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000							RD	A - 23						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			25					RATE FEE			RATE	FEE		
FOR			NUMBER F	ILED	NUMBI	ER EXTRA BASI			FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			25minus 20= 1		· 5 [^]			X\$ 9= 1-15		OR	X\$18=			
INDEPENDENT CLAIMS			2 minus 3 = *		* *	0		X40=			OR	X80=		
МU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+135=					+270=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				Į			1106	OR	L		
CLAIMS AS AMENDED - PART II							TOTA	\L	406	OR	OTHER	THAN		
	Ci	(Column 1)	(Column 2) (Column 3)					SMAI	LL E	NTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATI	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE /	
	Total	. 25	Minus	** 6	25	= /		X\$ 9	=		OR	X\$18=		
	Independent	. 3	Minus	***	3	= /		X40=	_		OR	X80=	/ .	
_	FIRST PRESE	NTATION OF M	JLTIPLE DEP	ENDEN	T CLAIM			. 105			Ì	+270=/		
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		(0.1		(0.1	O\	(0-1 0)		ADDIT. F			OR	ADDIT. FEE		
\Box		(Column 1) CLAIMS		HIGH	mn 2) HEST	(Column 3)	1 r		_	ADDI-	i	,	ADDI-	
MENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATI	Ε	TIONAL FEE		RATE	TIONAL FEE	
Š	Total	*	Minus	**		=	$ \ $	X\$ 9	=		OR	X\$18=		
AMEND	Independent	*	Minus	***		-		X40:	=		OR	X80=		
L	FIRST PRESE	NTATION OF M	JLTIPLE DEP	ENDEN	CLAIM	Ш]	+135	_		OR	+270=		
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		(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. F				ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA] [RATI	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
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ME	Independent	*	Minus	***		<u> </u> =]	X40=	_			X80=		
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM		J ∤		\dashv		OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+135			OR	+270=			
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														